

Commonwealth of Kentucky Public Service Commission

INFORMATION FORM FOR TELEPHONE UTILITIES OPERATING PURSUANT TO KRS 278.541 through 278.544

Complete Name of Telephone Utility: Claro Enterprise Solutions, LLC

Physical Address of Principal Office: Street: 3350 SW 148TH AVE., Ste. 400
City: Miramar State: FL Zip: 33027

Primary Contact: Name: Oyebimpe Oyewale-Smith Title: Contracts and Compliance Spec.

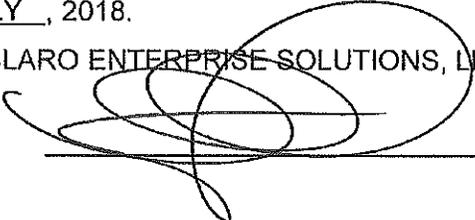
Phone: 954-5713-7303 Fax: _____

E-Mail: oye.oyewale@usclaro.com

Person Responsible for Answering Consumer Complaints:	Name: <u>Oyebimpe Oyewale-Smith</u> Title: <u>Contracts and Compliance Spec.</u>
	Address (if different from above)
	Street: _____
	City: _____ State: _____ Zip: _____
	Phone: _____ Fax: _____

In accordance with KRS 278.542 (2), which requires telephone utilities operating pursuant to 2006 KRS 278.541 through KRS 278.544 to file with the Commission certain information, I, Luis Segovia, on behalf of Claro Enterprise Solutions, LLC do hereby certify that the foregoing information is true and correct to the best of my knowledge, as of this 5TH day of JULY, 2018.

UTILITY: CLARO ENTERPRISE SOLUTIONS, LLC

BY: 

STATE OF Florida
COUNTY OF Broward

The foregoing was signed, sworn to and acknowledged before me, the NOTARY PUBLIC, on this the 5th day of July, 2018.


NOTARY PUBLIC

My Commission Expires: March 24, 2019

